

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH

1. County of.....

District of.....

Town of.....

or

City of..... No..... St..... Ward.....
(If birth occurred in a hospital or institution, give its NAME instead of street and number)BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTHState Index No. 111County Registrar No. 508Local Registrar No. 5082. Full name of child Geraldine Bonilla { If child is not yet named, make supplemental report, as directed.3. Sex of Child Female To be answered ONLY in event of plural births. 4. Twin, triplet or other..... 5. No., in order of birth..... 6. Legitimate? yes 7. Date of birth 2 3 26
Month Day Year

8. FATHER

Full name Arthur Bonilla9. Residence (Usual place of abode) Marine

If non-resident, give place and state.

10. Color or race W. Am.11. Age at last birthday 27 (Years)12. Birthplace (city or place) California

(State or country)

13. Occupation

Nature of Industry Service Station

14. MOTHER

Full maiden name Ila Cain15. Residence (Usual place of abode) Marine

If non-resident, give place and state.

16. Color or race W. Am.17. Age at last birthday 28 (Years)18. Birthplace (city or place) Mo.

(State or country)

19. Occupation

Nature of industry HW20. Number of children of this mother { (a) Born alive and now living 1
(Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead.....
(c) Stillborn..... 21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was alive at 11 a m. on the date above stated
(Born alive or stillborn){ * When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidence of life after birth. } Signature C. J. Ruffino (Physician or midwife).Given name added from a supplemental report. Filed March 4, 1926 C. J. Ruffino Local Registrar.

Month, day, year

Registrar

Filed....., 19.....

County Registrar.

721-203-935